

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		20	2/10
O.I.P.E. CLASSIFIER		913	6/23/01
FORMALITY REVIEW	H-T	905	9/25/01
RESPONSE FORMALITY REVIEW	yn		

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	11/2/00	
2	✓	11/1/01	
3	✓	11/4/01	
4	✓		
5	✓		
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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